

General

Title

Access to referrals: percentage of children who needed referrals and had a problem obtaining them.

Source(s)

2011/12 National Survey of Children's Health. CATI instrument (full-length survey). Rockville (MD): Health Resources and Service Administration, Maternal and Child Health Bureau, and Centers for Disease Control and Prevention, National Center for Health Statistics; 2012. 126 p.

Measure Domain

Primary Measure Domain

Population Health Quality Measures: Population Access

Secondary Measure Domain

Does not apply to this measure

Brief Abstract

Description

This measure is used to assess the percentage of children who needed referrals and had a problem obtaining them, based on parents' response to the following items on the 2011-12 National Survey of Children's Health (NSCH):

K5Q10: During the past 12 months/Since (his/her) birth, did [child] need a referral to see any doctors or receive any services?

Response choices for the above question are "Yes," "No," "Don't know," and "Refused."

K5Q11: Was getting referrals a big problem, a small problem, or not a problem?

Response choices for the above question are "Big problem," "Small problem," "Not a problem," "Don't know," and "Refused."

Rationale

Children who have problems getting referrals when they need them are at increased risk of lower health outcomes. Lack of access to care is consistently related to poorer health outcomes. Increasing access to referrals should have numerous benefits for improving the health of children, both directly and indirectly.

There is a broad range in the proportion of children who have problems obtaining referrals when needed. The range across states is 9.2% of children living in Georgia to 31.4% of children in California.

Evidence for Rationale

Child and Adolescent Health Measurement Initiative (CAHMI). National Quality Measures Clearinghouse (NQMC) measure submission form: access to referrals: percentage of children who needed referrals and had a problem obtaining them. 2013 Apr. 13 p.

Primary Health Components

Obtaining referrals; children

Denominator Description

Children age 0-17 years living in the United States who needed a referral for providers or services in the past 12 months (K5Q10=Yes), for whom a 2011-12 National Survey of Children's Health (NSCH) was completed

Numerator Description

Children from the denominator whose parents indicated "Big problem" or "Small problem" to the following question on the 2011-12 National Survey of Children's Health (NSCH):

K5Q11: Was getting referrals a big problem, a small problem, or not a problem?

Evidence Supporting the Measure

Type of Evidence Supporting the Criterion of Quality for the Measure

A formal consensus procedure, involving experts in relevant clinical, methodological, public health and organizational sciences

One or more research studies published in a National Library of Medicine (NLM) indexed, peer-reviewed journal

Additional Information Supporting Need for the Measure

- Nationally, 20.8% of children age 0-17 years had a big or small problem obtaining needed referrals.
- 34.8% of Hispanic children whose primary household language is Spanish, 26.9% of Hispanic children whose primary household language is English and 18.2% of non-Hispanic children had a big or small problem obtaining needed referrals.
- 29.9% of children living at 0 to 99% of the federal poverty level (FPL), 21.8% of children living at 100% to 199% FPL, 19.0% of children living at 200% to 399% FPL and 13.5% of children living at 400% FPL or higher had a big or small problem obtaining needed referrals.
- 43.5% of uninsured children, 24.9% of publicly insured children and 15.9% of privately insured

children had a big or small problem obtaining needed referrals.

- 24.5% of children with special health care needs (CSHCN) with functional limitations and 18.5% of non-CSHCN had a big or small problem obtaining needed referrals.

Evidence for Additional Information Supporting Need for the Measure

The National Survey of Children's Health. [internet]. Baltimore (MD): Child and Adolescent Health Measurement Initiative (CAHMI); [accessed 2013 Dec 20]. [1 p].

Extent of Measure Testing

The National Center for Health Statistics (NCHS) conducted testing of the 2011-12 National Survey of Children's Health (NSCH) Computer-Assisted Telephone Interview (CATI) to make sure the entire survey instrument was functioning properly. A total of 95,677 surveys were completed nationally for children between the ages of 0 and 17 years. The questionnaire was then revised and finalized based on feedback from participants in these interviews.

The Maternal and Child Health Bureau leads the development of the NSCH and National Survey of Children with Special Health Care Needs (NS-CSHCN) survey and indicators, in collaboration with the NCHS and a national technical expert panel. The expert panel includes representatives from other federal agencies, state Title V leaders, family organizations, and child health researchers, and experts in all fields related to the surveys (adolescent health, family and neighborhoods, early childhood and development, etc.). Previously validated questions and scales are used when available. Extensive literature reviewing and expert reviewing of items is conducted for all aspects of the survey. Respondents' cognitive understanding of the survey questions is assessed during the pretest phase and revisions made as required. All final data components are verified by NCHS and Data Resource Center/Child and Adolescent Health Measurement Initiative (DRC/CAHMI) staff prior to public release. Face validity is conducted in comparing results with prior years of the survey and/or results from other implementations of items. No specific reliability results are available for this measure.

Evidence for Extent of Measure Testing

Blumberg SJ, Foster EB, Frasier AM, Satorius J, Skalland BJ, Nysse-Carris KL, Morrison HM, Chowdhury SR, O'Connor KS. Design and operation of the National Survey of Children's Health, 2007. *Vital Health Stat 1*. 2012 Jun;(55):1-149. [PubMed](#)

Child and Adolescent Health Measurement Initiative (CAHMI). National Quality Measures Clearinghouse (NQMC) measure submission form: access to referrals: percentage of children who needed referrals and had a problem obtaining them. 2013 Apr. 13 p.

Section 5: medical home. In: Summary of 2007 NSCH pretest results. Baltimore (MD): Child and Adolescent Health Measurement Initiative (CAHMI); p. 10-11.

State of Use of the Measure

State of Use

Current routine use

Current Use

not defined yet

Application of the Measure in its Current Use

Measurement Setting

National Public Health Programs

Professionals Involved in Delivery of Health Services

not defined yet

Least Aggregated Level of Services Delivery Addressed

State/Provincial

Statement of Acceptable Minimum Sample Size

Unspecified

Target Population Age

Age less than or equal to 17 years

Target Population Gender

Either male or female

National Framework for Public Health Quality

Public Health Aims for Quality

Population-centered

National Strategy for Quality Improvement in Health Care

National Quality Strategy Aim

Healthy People/Healthy Communities

National Quality Strategy Priority

Health and Well-being of Communities
Person- and Family-centered Care
Prevention and Treatment of Leading Causes of Mortality

Institute of Medicine (IOM) National Health Care Quality Report Categories

IOM Care Need

Getting Better

Living with Illness

Staying Healthy

IOM Domain

Effectiveness

Equity

Patient-centeredness

Data Collection for the Measure

Case Finding Period

Unspecified

Denominator Sampling Frame

Geographically defined

Denominator (Index) Event or Characteristic

Encounter

Geographic Location

Patient/Individual (Consumer) Characteristic

Denominator Time Window

not defined yet

Denominator Inclusions/Exclusions

Inclusions

Children age 0-17 years living in the United States who needed a referral for providers or services in the

past 12 months (K5Q10=Yes), for whom a 2011-12 National Survey of Children's Health (NSCH) was completed

Exclusions
Unspecified

Exclusions/Exceptions

not defined yet

Numerator Inclusions/Exclusions

Inclusions

Children from the denominator whose parents indicated "Big problem" or "Small problem" to the following question on the 2011-12 National Survey of Children's Health (NSCH):

K5Q11: Was getting referrals a big problem, a small problem, or not a problem?

Exclusions
Unspecified

Numerator Search Strategy

Fixed time period or point in time

Data Source

Patient/Individual survey

Type of Health State

Does not apply to this measure

Instruments Used and/or Associated with the Measure

2011-12 National Survey of Children's Health (NSCH)

Computation of the Measure

Measure Specifies Disaggregation

Does not apply to this measure

Scoring

Composite/Scale

Interpretation of Score

Desired value is a lower score

Allowance for Patient or Population Factors

not defined yet

Description of Allowance for Patient or Population Factors

This measure, administered in its most recent form (in the 2011-12 National Survey of Children's Health [NSCH]), includes a number of child demographic variables that allow for stratification of the findings by possible vulnerability:

- Age
- Gender
- Geographic location
- Race/ethnicity
- Health insurance - status, type, consistency, adequacy
- Primary household language
- Household income
- Special Health Care Needs - status and type
- Family structure
- Emotional, behavioral or developmental issues
- Presence of a medical home

Standard of Comparison

not defined yet

Identifying Information

Original Title

Children who had problems obtaining referrals when needed.

Measure Collection Name

2011/12 National Survey of Children's Health

Submitter

Child and Adolescent Health Measurement Initiative - Nonprofit Organization

Developer

Child and Adolescent Health Measurement Initiative - Nonprofit Organization

Maternal and Child Health Bureau of the Health Resources and Service Administration - Federal Government Agency [U.S.]

National Center for Health Statistics of the Centers for Disease Control and Prevention - Federal

Funding Source(s)

Maternal and Child Health Bureau of the Health Resources and Service Administration

Composition of the Group that Developed the Measure

External (non-governmental) technical expert panel members (2006): Paul Newacheck, DrPH, MPP (Chairperson) (University of California, San Francisco); Maja Alatarac, MD, PhD (University of Alabama at Birmingham); Christina Bethell, PhD, MBA, MPH (Oregon Health and Science University); Neal Halfon, MD (University of California, Los Angeles); William Hollinshead, MD (Rhode Island Department of Health); Charles Irwin, MD (University of California, San Francisco); Jeffrey Lobas, MD, MPA (Iowa Child Health Specialty Clinics); Kristin Anderson Moore, PhD (Child Trends); Lynn Olson, PhD (American Academy of Pediatrics); Edward Schor, MD (The Commonwealth Fund); Judith Shaw, EdD, MPH, RN (University of Vermont)

Financial Disclosures/Other Potential Conflicts of Interest

The Child and Adolescent Health Measurement Initiative is partially supported by Cooperative Agreement 1-U59MC27866 from the Maternal and Child Health Bureau (MCHB), Health Resources and Services Administration, U.S. Department of Health and Human Services. No conflicts of interest exist.

Adaptation

This measure was not adapted from another source.

Date of Most Current Version in NQMC

2013 Apr

Measure Maintenance

Every 4 years

Date of Next Anticipated Revision

No changes anticipated.

Measure Status

This is the current release of the measure.

This measure updates a previous version: National Survey of Children's Health. CATI instrument (full-length survey). Rockville (MD): Health Resources and Service Administration, Maternal and Child Health Bureau, and Centers for Disease Control and Prevention, National Center for Health Statistics; 2007. 112 p.

The measure developer reaffirmed the currency of this measure in October 2015.

Measure Availability

Source available from the [Centers for Disease Control and Prevention \(CDC\) National Center for Health Statistics Web site](#) .

For more information, contact CAHMI at 615 North Wolfe Street, Room E4640, Baltimore, MD 21205; Phone: 410-955-1848; Fax: 503-494-2473; E-mail: info@cahmi.org; Web site: www.cahmi.org .

Companion Documents

The following are available:

Blumberg SJ, Foster EB, Frasier AM, Satorius J, Skalland BJ, Nysse-Carris KL, Morrison HM, Chowdhury SR, O'Connor KS. Design and operation of the National Survey of Children's Health, 2007. Vital Health Stat 1. 2012 Jun;(55):1-149. This document is available from the [Centers for Disease Control and Prevention \(CDC\) National Center for Health Statistics Web site](#) .

Centers for Disease Control and Prevention (CDC), National Center for Health Statistics. 2011-2012 National Survey of Children's Health state and local area integrated telephone survey: frequently asked questions. Atlanta (GA): Centers for Disease Control and Prevention; 2013 Apr. 8 p. This document is available from the [CDC National Center for Health Statistics Web site](#) .

Child and Adolescent Health Measurement Initiative (CAHMI). 2011-2012 National Survey of Children's Health. SPSS code for data users: child health indicators and subgroups, version 1.0. Baltimore (MD): Data Resource Center for Child and Adolescent Health; 2013 Apr. 201 p. This document is available from the [Data Resource Center for Child and Adolescent Health Web site](#) .

NQMC Status

This NQMC summary was completed by ECRI Institute on October 13, 2011. The information was verified by the measure developer on November 3, 2011.

This NQMC summary was updated by ECRI Institute on May 13, 2014. The information was verified by the measure developer on June 18, 2014.

The information was reaffirmed by the measure developer on October 27, 2015.

Copyright Statement

No copyright restrictions apply.

Production

Source(s)

2011/12 National Survey of Children's Health. CATI instrument (full-length survey). Rockville (MD): Health Resources and Service Administration, Maternal and Child Health Bureau, and Centers for Disease Control and Prevention, National Center for Health Statistics; 2012. 126 p.

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